McNair Scholars Program
Wayne State University

Participant Application Packet

Eligibility

Last Name: _____ First Name: _____ M.I _____

Major _____ SSN: _____ Banner Id: _____

Address: _____

City: _____ State: _____ Zip code: _____ DOB: _____

Phone Number: _____ Email address: _____

Citizenship: _____ US Citizen   Gender as listed on Government Issued ID:

     _____ Permanent Resident   _____ Male   _____ Female

Resident Alien Number (if applicable):   Gender Pronouns: _____

_____

Enrollment Status: _____ Full-time _____ Part-time   Past TRIO Participation: _____ Yes _____ No

Disability: _____ Yes _____ No   If yes, please explain: _____

_____

Have you previously earned a bachelor's degree? _____ Yes _____ No

(Students earning a second bachelor's degree are ineligible for McNair)

Ethnicity:

_____ African American/Black (other than Hispanic)   _____ Native Hawaiian/Pacific Islander

_____ American Indian/Native Alaskan   _____ White

_____ Hispanic/Latino   _____ Other

Mark ALL Statements that best describe your first-generation college student status:

_____ Neither of your natural or adoptive parent(s) have received a four-year college degree.

_____ You are from a single-parent household and lived with a parent prior to age of 18, and that parent has not received a four-year college degree.

_____ You were an orphan or ward of the court.

_____ None of these statements apply.

List all financial assistance you are currently receiving, including scholarships and work-study:

_____

_____

_____

Current immediate Household Size & Low-Income Levels (as of January 19, 2023)

Family Size	Family Taxable Income	Alaska Only	Hawaii Only
1	$21,870	$27,315	$25,155
2	$29,580	$36,960	$34,020
3	$37,290	$46,605	$42,885
4	$45,000	$56,250	$51,750
5	$52,710	$65,895	$60,615
6	$60,420	$75,540	$69,480
7	$68,130	$85,185	$78,345
8	$75,840	$94,830	$87,210

For family units with more than eight members, add the following amounts for each addition family member: $7,710 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; $9,645 for Alaska; and $8,865 for Hawaii. For more information: https://www2.ed.gov/about/offices/list/ope/trio/incomelevels.html

ALL APPLICANTS MUST PROVIDE INCOME VERIFICATION: COPY OF YOUR OR YOUR PARENT'S FILED FEDERAL 2021 INCOME TAX DOCUMENTS OR FAFSA STUDENT AID REPORT

I have a strong desire to attain a PhD or other academic (non-professional) doctorate:_____Yes_____No

Academic Standing as of Fall 2022:_____Freshman_____Sophomore_____Junior_____Senior

Expected Graduation Date:_____Fall_____Winter _____Spring/Summer 20_____

Prospective Faculty Mentor

The McNair Scholars Program includes a Mentored Research Experience, in which Scholars complete a research project with a faculty mentor. It is important that each student work closely with a faculty mentor in their field to learn specific details about graduate school expectations related to the field of study. Prior contact with a faculty member is not required. We only require you identify faculty in your discipline/major that you are *interested* in working with. Please list up to three prospective faculty mentors, their department and email.

Faculty Mentor Name	**Department**	**Email**
1._____	_____	_____
2._____	_____	_____
3._____	_____	_____

Essay

Please write an essay outlining your academic and career goals, research interests, your ideas on what a doctoral degree can do for you, your reason for wanting to participate in the McNair Program, and your desire to teach at the college level or conduct scholarly research. *Essays must be typed, a minimum of 300 words, and well-written. Excessive grammatical errors will affect the participant's eligibility.*

Complete the following checklist to ensure you have submitted all the required information to receive full consideration.

_____ Participant application packet (completed accurately)

_____ Academic Plan via Degree Works signed by your academic advisor

_____ Essay

_____ Resume

_____ Recommendation Forms (Juniors submit two, Sophomores submit one)

At least one must be completed by a teaching faculty member in your department, and the other may be completed by an academic advisor, college counselor, or work supervisor. If you are or were a participant of another TRIO program, one from your counselor or director of that program.

_____ Unofficial College Transcript

_____ Income Verification: Copy of your or your parent's filed federal 2021 income tax documents or FAFSA Student Aid Report.

Dependent students are only required to submit their parent's information and independent students are only required to submit their own information. Dependency status determined by Federal Aid regulations.

By my signature below, I certify that the information I provided on and in connection with this application is true, accurate and complete.

_____   _____

Signature   **Date**

For Office Use Only:

_____ **Signed Application**	**Eligibility:** _____ **LIFG or** _____ **UR**
_____ **Essay**	_____ **Reported Income**
_____ **Resume**	_____ **Family Size**
_____ **Unofficial Transcript**	_____ **GPA**
_____ **Recommendation (Faculty)**	_____ **Sophomore** _____ **Junior** _____ **Senior**
_____ **Recommendation**	**Status:** _____ **Accepted**
_____ **Academic Plan of Work**	_____ **Denied (Reason)** _____
_____ **Tax Document/FAFSA**	

Approval: Program Director _____ **Date** _____